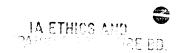
File with: lowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form



FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

		ZUUU JUL	21 MIZ: 13
COMMITTEE NAME (Must be same as on Statement of Organization)			
Anderson Campaian		ORM	1
IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political		PR-2 v. 07/2007)	DISCLOSURE REPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue		Office Use On	iv
CANDIDATE COMMITTEES ONLY:			
Candidate Name Political Party (if applicable)			
Jon Anderson Republican			
Office Sought USENSTET COUNTY SUPERVISOR District (if Senate or House)	Audi	ted	
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) a	and 68A.	401(3), the ca	ndidate, for a
Janette L. anduson 515-359-2333	7/	lala	
7/*************************************	.//	8/08	
SIGNATURE OF PERSON FILING REPORT TELEPHONE		DATE S	IGNED
I AM FILING A TU/4 21, 2008 REPORT FOR (1) ELECTION /(2)	NON-FI	ECTION YE	AR
(report date) Indicate by #	7		· u · c
TOURON IS AMENIOMENT TO DEPORT DATED	, 		
		ttees, enter Da ${\it 2}$	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.			, enter County in
(You must continue to me reports until a DR-3 is filled.)	h Election	n is held	-
	wez	bster	
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$	4	48,22
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		2	000.00
Schedule F: Loans Received total (Attach Schedule F)			300.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		•	
(Schedule H applies to Candidates' Committees Only)			
SUB-TOTAL	\$	<u> </u>	748,22
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<i>ā</i>	479.00
Schedule F: Loan Repayments total (Attach Schedule F)			269.22
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$		0.00
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$		30.78
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES	NO

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

CANDIDATE COMMITTEES ONLY:

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must	e same as or	n Stateme	nt of Orga	nization)	
	_		_	,	l
Anderson	Cam	Dall	01)		ł
* /					

SCHEDULE					
(Rev. 07/03)	MONETARY RECEIPTS				
CHECK THIS BOX IF					
	INDING! OIGH				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5/15/08 5/16/08	ID# CK#	Jon Anderson 2735-2865+ Lenigh Ia. 50657 Fanette Anderson 2735-28655: Lehigh, Ia. 50557	se/f	\$ /000.00	
5/16/08		Tanette Anderson 2735-286 5 5t. Lehigh, Ia. 50557	Wife! committee treasurer	1000.00	
	ID# CK#	·			
	ID# CK#				
		<u> </u>	SUB-TOTAL		

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ____

MITTEE NAME	(Must be same as on Statement of Organization)	RESET	SCHEDULE
Andei	TSON CAMPAIGN		(Rev. 02/08) RECEP
	e reports money loaned to the committee which is de	eposited in the committee account.	CHECK THIS BO
	ANS FROM <u>LAST</u> REPORTING PERIOD \$	0.00	AMENDING FORI
ΓΙ- MONETAR (Original s	RY LOANS RECEIVED THIS REPORTING PERIOD ource of loan, such as a bank, must be shown if a thi	rd party is involved. Include loans from ca	ndidate's necessal functs (
DATE RECEIVED	NAME AND ADDRESS OF LENDER	R RELATIONSHIP TO	AMOUNT OF LOAN
(MM/DD/YR)	(Include Endorser's Name, If Applicabl	e) CANDIDATE (if Applica	ble*)
128/08	Janette Anderson	wife & committee weasyn	210,00
130/08	2135 286 - 57. Lehigh, Ta. 50557 Julia Anderson 3728 5. E. 25 - Cour Des Mo., Ta 50	t sister	
		TOTAL (PART I)	s 300.00
RT II - MONETA (Loans fo	ARY LOAN REPAYMENTS MADE THIS REPORTING THIS REPORTING THE PROPERTY OF THE PRO	IG PERIOD utributions.)	
	MAKE AND ADDRESS OF LENDER	RELATIONSHIP TO e) CANDIDATE* (If Applica	AMOUNT REPAID
1	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable	e) CANOIDATE (II Applica	
1	(Include Endorser's Name, If Applicable	in fe to committee	rer 269.22
1	Jandhanderson 2735-28425t. Lehigh, Ta. 50557	in flet to munitee	9
1	(Include Endorser's Name, If Applicable	in fe trommittee	Ş
DATE PAID MM/DD/YR)	(Include Endorser's Name, If Applicable	in the tommittee mask	S
1	(Include Endorser's Name, If Applicable	infly technities	S
1	Jand Anderson 2735-284-5t. Lehigh, Ta. 50557	TAL CASH REPAYMENTS (PART II)	S

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page_____of ____

7.00	1	11.0	-	HI	1.0
200	CHA	COL.	-	30 3 2	1.14
110000			100000	Contract to	200

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization) inderson ampaign CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE **ID NUMBER EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# yard Signs 2200 Central ave. « 391.14 Pt. Dodge Ia. 50501 Dayton Review Campaign ads P.O. Box 6, Main+ Skillet Dayton La. 50530 60 wrie News 1108 Market St. Campaign ad 60,00 60wrie Ia. 50543 Gowrie News cumpaign ad 115,00 1108 Market st. 60wrie I.a. 50543 ID# Campaign ads Stratford Courier 820 Shakespeare 117.00 CK# Stratford ! FORT Dodge Messenger 713 Central Ave. BUX 659 ID# Campaign ads + thank-you for after election CK# FORT Dodge Ia. 50501 ID# Campaign mailers Jifi Printer 2200 Central Ove. FORT Dodge Ia, 505 ID# Campaign mailers 2900 Central Que. CK# Fort Dodge, Ia. 50501 SUB-TOTAL \$ 2386,25

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page of	Page	/	_ of	<u>2</u>
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TOTAL (if last page of this schedule)

Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
. —	CK THIS BOX IF

COMMITTEE NAME	(Must be	same as on	Statement	of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/1	ID#	Courses Nous	Augustan though and	
45/08	CK#	COWTIE News 1108 Market St. GOWTIE TA: 50543	Campaign thank you's	\$ 30,00
1.11	ID#	Dayton Review	A STATE AND ASSESSED.	,
45/08	CK#	Mayron Kevicus Mayron Skillet, Box G Dayton Za. 50530	Carupaign thankym (after election)	
1.1 1	ID#	Stratford Courier	aurunation thank	
430/08	CK#	820 Shakespeare Stratford, In. 50249	Cumatan thank youfer after election	22.75
	ID#			
	CK#			
	ID#			
	CK#			•
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
		<u> </u>		

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	7	o.f	2	
Page		of	5	

SUB-TOTAL

TOTAL (if last page of this schedule)

COMMITTEE NAME (Must be same as on Statement of Organization) Anderson Cumpaign Reset Form				(Rev. 06/97) CONTRIBUTIONS CHECK THIS BOX IF AMENDING FORM	
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
6/30/08	Julia anderson 3728 SE 25th Court Des Moines Ea 50320	sister	loan forgiven	30.18	
•					
SUB-TOTAL TOTAL (if last page of this schedule)				\$ 30.78 \$ 30.78	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Page of (for Schedule E)

SCHEDULE

IN-KIND